Case 14-30175-KRH Doc 1 Filed 01/14/14 Entered 01/14/14 11:36:49 Desc Main Document Page 1 of 46

BI (Official)			United Ea		s Bankı District o						Volunt	tary Petition
Name of Do Colema	*	ividual, ent	er Last, First	, Middle):			Name	of Joint De	ebtor (Spouse	e) (Last, First	, Middle):	
All Other Na (include man			or in the last e names):	8 years			All Of (include	ther Names de married,	used by the J maiden, and	Joint Debtor trade names	in the last 8 years):	s
Last four dig	e, state all)	Sec. or Indi	vidual-Taxp	ayer I.D. ((ITIN)/Com	plete EIN	Last for	our digits o	f Soc. Sec. or	r Individual-	Γaxpayer I.D. (IT	TIN) No./Complete EIN
Street Addre	ess of Debto	*	Street, City,	and State)):	ZIP Code		Address of	Joint Debtor	(No. and Str	reet, City, and Sta	ate): ZIP Code
						23112						ZH Code
Chester	field		cipal Place o					•		•	ace of Business:	
Mailing Add	dress of Deb	otor (if diffe	rent from str	eet addres	ss):		Mailir	ng Address	of Joint Debt	or (if differe	nt from street add	dress):
					Г	ZIP Code	;					ZIP Code
Location of (if different				•								
	Type of of Organizati	f Debtor				of Business	S				otcy Code Under	
Individu See Exhib □ Corporat □ Partnersl □ Other (If	ial (includes bit D on page tion (include hip	Joint Debte 2 of this formes LLC and	ors) n. LLP) bove entities,	Sing in 1 Rail Stoo	alth Care Bugle Asset Ro 1 U.S.C. § Iroad ckbroker nmodity Bro aring Bank	siness eal Estate as 101 (51B)	s defined	☐ Chapt☐	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl of	a Foreign Main hapter 15 Petition a Foreign Nonm	n for Recognition Proceeding n for Recognition
1	lebtor's center	oreign procee	rests:	☐ Deb	Tax-Exe	the United S	e) zation tates	defined "incurr	are primarily co d in 11 U.S.C. § red by an indivi onal, family, or	(Check consumer debts, § 101(8) as idual primarily	for	Debts are primarily business debts.
	Fi	ling Fee (C	heck one bo	x)		Check	one box:	<u> </u>	Chap	ter 11 Debt	ors	
attach sig debtor is Form 3A.	e to be paid in ned application unable to pay e waiver reque	n installments on for the cou fee except in	s (applicable to unt's considerat n installments. able to chapter unt's considerat	ion certifyi Rule 1006 7 individu	ing that the (b). See Office als only). Mu	Check Check Check BB.	Debtor is not if: Debtor's agg are less than all applicable A plan is bein Acceptances	a small busi regate nonco \$2,490,925 (e boxes: ng filed with of the plan w	ntingent liquida amount subject this petition.	defined in 11 U ated debts (exc to adjustment	J.S.C. § 101(51D). cluding debts owed	to insiders or affiliates) ery three years thereafter). es of creditors,
☐ Debtor e	estimates that estimates that	nt funds will nt, after any	aation * l be available exempt prop for distribut	e for distri erty is ex	cluded and	nsecured cr administrat		es paid,		THIS	SPACE IS FOR C	OURT USE ONLY
Estimated N 1- 49	Number of C 50- 99	reditors 100- 199	200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000			
Estimated A So to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion			
Estimated L \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion				

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B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Coleman, Keith (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. \mathbf{X} /s/ Pia J. North January 14, 2014 Signature of Attorney for Debtor(s) (Date) Pia J. North 29672 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13) Document Page 3 of 46

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Keith Coleman

Signature of Debtor Keith Coleman

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

January 14, 2014

Date

Signature of Attorney*

X /s/ Pia J. North

Signature of Attorney for Debtor(s)

Pia J. North 29672

Printed Name of Attorney for Debtor(s)

North & Associates, P.C. Bar# 29672

Firm Name

5913 Harbour Park Drive Midlothian, VA 23112

Address

Email: northlawhelp@pianorth.com (804) 739-3700 Fax: (804) 739-2550

Telephone Number

January 14, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Coleman, Keith

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•			LUD

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

v
Λ

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

T
v

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Eastern District of Virginia

In re	Keith Coleman		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2				
1 ,	109(h)(4) as impaired by reason of mental illness or lizing and making rational decisions with respect to				
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, of through the Internet.);					
☐ Active military duty in a military co	mbat zone.				
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.					
I certify under penalty of perjury that the i	nformation provided above is true and correct.				
Signature of Debtor: /s/ Keith Coleman					
	Keith Coleman				
Date:	4				

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Eastern District of Virginia

In re	Keith Coleman		Case No		
-		Debtor			
			Chapter	13	
			<u> </u>		

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	152,700.00		
B - Personal Property	Yes	3	3,600.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		208,038.47	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		114,233.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			2,641.17
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,401.17
Total Number of Sheets of ALL Schedu	ıles	19			
	T	otal Assets	156,300.00		
			Total Liabilities	322,271.47	

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B 6 Summary (Official Form 6 - Summary) (12/13)

United States Bankruptcy Court Eastern District of Virginia

In re	Keith Coleman		Case No.	
		, Debtor	,	
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	89,403.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	89,403.00

State the following:

Average Income (from Schedule I, Line 12)	2,641.17
Average Expenses (from Schedule J, Line 22)	2,401.17
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	831.00

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		55,338.47
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		114,233.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		169,571.47

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B6A (Official Form 6A) (12/07)

In re	Keith Coleman	Case No.	
_		Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

13705 Nashua Place, Midlothian, VA 23112 AVOID	Sole	-	152,700.00	208,038.47	
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim	

LIEN Chesterfield County

Current Market Analysis: \$152,700 January 2014

Tax Assessment: \$179,900 Zillow Range: \$173,000 - \$191,000

Sub-Total > **152,700.00** (Total of this page)

Total > **152,700.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Keith Coleman	Case No.	
		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash Approx.	-	100.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	Checking Account - Union First Market \$1,000 Approx. Savings Account - Debtor does not have an interes in this type of property.	- it	1,000.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Household Goods	-	2,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		
6.	Wearing apparel.	Clothes	-	500.00
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	Dupont Group Term Life Insurance policy NO Cash Value	-	0.00
10.	Annuities. Itemize and name each issuer.	X		
		(Total	Sub-Tot of this page)	al > 3,600.00

2 continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

			Debtor		
	\$	SCHEDULE	B - PERSONAL PROPE (Continuation Sheet)	CRTY	
	Type of Property	N O N E	Description and Location of Property	Joint, or	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
d u a C re	nterests in an education IRA as efined in 26 U.S.C. § 530(b)(1) or nder a qualified State tuition plan s defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the ecord(s) of any such interest(s). 1 U.S.C. § 521(c).)	х			
0	nterests in IRA, ERISA, Keogh, or ther pension or profit sharing lans. Give particulars.	X			
a	tock and interests in incorporated nd unincorporated businesses. temize.	x			
	nterests in partnerships or joint entures. Itemize.	x			
a	Government and corporate bonds nd other negotiable and onnegotiable instruments.	x			
6. A	Accounts receivable.	X			
p d	alimony, maintenance, support, and roperty settlements to which the ebtor is or may be entitled. Give articulars.	x			
	Other liquidated debts owed to debtor including tax refunds. Give particulars.				
e e d	Equitable or future interests, life states, and rights or powers xercisable for the benefit of the ebtor other than those listed in schedule A - Real Property.	x			
iı d	Contingent and noncontingent nterests in estate of a decedent, eath benefit plan, life insurance olicy, or trust.	X			
c ta d	Other contingent and unliquidated laims of every nature, including ax refunds, counterclaims of the ebtor, and rights to setoff claims. Give estimated value of each.	NO Potential	claims or lawsuits	-	0.00

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Keith Coleman	Case No.
_		

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		Debtor does not have an interest in this type of property.	-	0.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 3,600.00 |

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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B6C (Official Form 6C) (4/13)

In re	Keith Coleman	Case No.
•		Debtor

SCHEDULE C -	PROPERTY CLAIMED A	AS EXEMPT				
Debtor claims the exemptions to which debtor is entitled un (Check one box) 11 U.S.C. §522(b)(2) 11 U.S.C. §522(b)(3)	\$155,675. (An	☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years to with respect to cases commenced on or after the date of adjustment of the date of the date of adjustment of the date				
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption			
Real Property 13705 Nashua Place, Midlothian, VA 23112 AVOID LIEN Chesterfield County Current Market Analysis: \$152,700 January 2014 Tax Assessment: \$179,900 Zillow Range: \$173,000 - \$191,000	Va. Code Ann. § 34-4	1.00	152,700.00			
<u>Household Goods and Furnishings</u> Household Goods	Va. Code Ann. § 34-26(4a)	2,000.00	2,000.00			
Wearing Apparel Clothes	Va Code Ann & 34-26(4)	500.00	500.00			

Total: 2,501.00 155,200.00

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B6D (Official Form 6D) (12/07)

In re	Keith Coleman	Case No	
_		Debtor ,	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J		CONTINGEN	UNLIQUIDAT	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxx0002 Argent Federal Credit 11651 Alliance Cir Chester, VA 23831		-	Opened 11/18/11 Last Active 7/03/12 Judgment Lien 13705 Nashua Place, Midlothian, VA 23112 AVOID LIEN Chesterfield County Current Market Analysis: \$152,700 January 2014 Tax Assessment: \$179,900	T	T E D			
	┵		Value \$ 152,700.00		Ш		18,008.47	18,008.47
Account No. xxxxxxxxxxxxxx0001 Wells Fargo Bank Nv Na Po Box 31557 Billings, MT 59107		-	Opened 6/18/08 Last Active 12/04/13 2nd Deed of Trust 13705 Nashua Place, Midlothian, VA 23112 AVOID LIEN Chesterfield County Current Market Analysis: \$152,700 January 2014 Tax Assessment: \$179,900					
	4	-	Value \$ 152,700.00	_			22,496.00	22,496.00
Account No. Edward S. Whitlock, Esquire Lafayette, Ayers & Whitlock 10160 Staples Mill Rd #105 Glen Allen, VA 23060			Collection agency: Wells Fargo Bank Nv Na Value \$				Notice Only	
Account No.	+	+	value \$	\vdash	Н			
Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123			Collection agency: Wells Fargo Bank Nv Na				Notice Only	
continuation sheets attached			Value \$ (Total of t	l Subt			40,504.47	40,504.47

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 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

In re	Keith Coleman	Case No.	_
_		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	J H H	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLIQUIDATED	SPUTE	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. Reiss F. Wilks, Attorney 4901 Cutshaw Avenue Richmond, VA 23230			Collection agency: Wells Fargo Bank Nv Na		ED		Notice Only	
			Value \$	1				
Account No. Wells Fargo RegAgent Corporation Service Company P.O. Box 1463 Richmond, VA 23218			Collection agency: Wells Fargo Bank Nv Na Value \$				Notice Only	
Account No. xxxxxxxxx1057 Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701		-	Opened 6/18/08 Last Active 1/01/14 Deed of Trust 13705 Nashua Place, Midlothian, VA 23112 AVOID LIEN Chesterfield County Current Market Analysis: \$152,700 January 2014 Tax Assessment: \$179,900 Value \$ 152,700.00				167,534.00	14,834.00
Account No.			Value \$, , , , , , , , , , , , , , , , ,	. 1,554.50
Account No.			Value \$					
Sheet 1 of 1 continuation sheets at		d to		Subt			167,534.00	14,834.00
Schedule of Creditors Holding Secured Clair	ns		(Report on Summary of S	Т	ota	ıl	208,038.47	55,338.47

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B6E (Official Form 6E) (4/13)

In re	Keith Coleman	Case No	
-		Debtor ,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appro schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed.
Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box lab "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent salar representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Feder Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Keith Coleman	Case No.
-		, Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C J AND ACCOUNT NUMBER (See instructions.) Tax year??? Notice ???? Account No. Commonwealth of VA-Tax 0.00 P.O. Box 2156 Richmond, VA 23218-2156 0.00 0.00 Tax year??? Notice???? Account No. Internal Revenue Service 0.00 **Insolvency Unit** Post Office Box 7346 Philadelphia, PA 19114 0.00 0.00 Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 0.00 0.00 Total 0.00 (Report on Summary of Schedules) 0.00 0.00

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R6F	Official	Form	6F)	(12/07)
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In re	Keith Coleman		Case No.	
-		Debtor	• >	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Тн	Hus	sband, Wife, Joint, or Community	Ç	Ü	Ţ	ΡĪ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J W	H W H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	l QU	<u>ן</u>	U T F	AMOUNT OF CLAIM
Account No. 9116	7	T		Opened 6/04/10 Last Active 8/01/11 Credit Card	T	DATED		Ī	
Bank Of America Po Box 982235 El Paso, TX 79998		-	-						5,360.00
Account No. xxxxxxxx3293	十	十	\forall	Opened 9/01/10 Last Active 6/10/11	+	\vdash	t	\forall	
Citi Po Box 6241 Sioux Falls, SD 57117		_	-	Credit Card					3,395.00
Account No. xxxxxxxxx7609	╅	T		Opened 8/16/04 Last Active 5/09/11	T	T	Ť	7	
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	(-		Educational -NO Payment in Ch 13 Plan					17,686.00
Account No. xxxxxxxxx7613	+	t	\dashv	Opened 8/25/06 Last Active 5/09/11	\dagger	†	t	\dagger	
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	(-		Educational -NO Payment in Ch 13 Plan					44.004.55
	丄	L				\perp	\perp	╛	11,364.00
3 continuation sheets attached				(Total of	Sub this			;)	37,805.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Keith Coleman	Case No	_
_		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CD FID WODIG VALVE	С	Hu	sband, Wife, Joint, or Community	С	Ιυ	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.		N L I Q I	I S P U T F	AMOUNT OF CLAIM
Account No. xxxxxxxxx7616			Opened 8/13/07 Last Active 5/09/11	Т	E		
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan		D		10,483.00
Account No. xxxxxxxxx7611	\dagger		Opened 8/15/05 Last Active 5/09/11	+			10,100100
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan				
	_			\perp			9,419.00
Account No. xxxxxxxxx7621 Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Opened 9/03/08 Last Active 5/09/11 Educational -NO Payment in Ch 13 Plan				8,746.00
Account No. xxxxxxxxx7614	T		Opened 1/17/07 Last Active 5/09/11	+	T		
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan				7,728.00
Account No. xxxxxxxxx7619	\dagger		Opened 1/16/08 Last Active 5/09/11	+		\vdash	
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan				7,205.00
Sheet no1 of _3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims	f	1	(Total of	Sub			43,581.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Keith Coleman		Case No
-		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	Ü	P	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	ONTINGEN	L QU	SPUT	AMOUNT OF CLAIM
Account No. xxxxxxxxx7612			Opened 1/13/06 Last Active 5/09/11	٦т	T E D		
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan				5,260.00
Account No. xxxxxxxxx7615	╁		Opened 1/26/07 Last Active 5/09/11	+			0,200.00
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan				3,429.00
Account No. xxxxxxxxx7618	╁	<u> </u>	Opened 10/01/07 Last Active 5/09/11				,
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan				3,356.00
Account No. xxxxxxxxx7620	╁		Opened 7/14/08 Last Active 5/09/11	-	+		3,330.00
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan				
Account No. xxxxxxxxx7617	╀		Opened 9/19/07 Last Active 5/09/11	_	_		2,755.00
Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144	x	-	Educational -NO Payment in Ch 13 Plan				1,972.00
Sheet no. 2 of 3 sheets attached to Schedule of		<u> </u>		Sub	tota	<u> </u> 1	
Creditors Holding Unsecured Nonpriority Claims			(Total of				16,772.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Keith Coleman	Case No.	
		Debtor	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

				—		_		
CREDITOR'S NAME,	0	Hu	sband, Wife, Joint, or Community	- Շ	I U	P		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	L Q D L C	DISPUTED	AMO	UNT OF CLAIM
, , ,	K	L		٦ ۲	A	١٦		
Account No. xxxxxx4295			Opened 3/01/12 Last Active 12/01/13 Credit Card Purchase	1'	A T E D			
Wells Fargo Bank Po Box 14517 Des Moines, IA 50306		-	Credit Card Furchase				_	8,443.00
	┡	_		$oldsymbol{\perp}$	+	L		
Account No.	ł							
Midland Fund			Collection agency:					
8875 Aero Dr Suite 200			Wells Fargo Bank					Notice Only
San Diego, CA 92123								,,
Account No. xxxxxx0396			Opened 11/10/09 Last Active 8/01/11	T		T		
	1		Credit Card					
Wells Fargo Bank								
Po Box 14517		-						
Des Moines, IA 50306								
								7,632.00
A N -	┝	┝		+	╁	╁		-,
Account No.	ł							
Account No.				Т		Γ		
	1							
Charter 2 of 2 of 4 to 1 to 0 1 1 to 0	1_				4			
Sheet no. <u>3</u> of <u>3</u> sheets attached to Schedule of				Sub				16,075.00
Creditors Holding Unsecured Nonpriority Claims			(Total of					
					Γota			114,233.00
			(Report on Summary of S	che	dul	es)		114,233.00

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B6G (Official Form 6G) (12/07)

In re	Keith Coleman	Case No.
_		Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 14-30175-KRH Doc 1 Filed 01/14/14 Entered 01/14/14 11:36:49 Desc Main Document Page 22 of 46

B6H (Official Form 6H) (12/07)

In re	Keith Coleman	Case No.
		Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega (Daughter)	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144
Courtney Artega, Daughter	Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144

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Fill	in this information to identify your c	250.							
	otor 1 Keith Colem								
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF VIRGINIA						
	se number nown)		-			Check if this is An amende A supplementation	ed filing		
0	fficial Form B 6I					MM / DD/ Y		owing date.	
	chedule I: Your Inc	ome				IVIIVI / DD/ 1	111		12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. 1: Describe Employment	r spouse is not filing w	ith you, do not include	e infor	matio	n about your sp	ouse. If moi	re space is	needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filir	ng spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed			☐ Empl	-		
	employers.	Occupation	Retired						
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed to	here? April 199	4					
Par	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for	any li	ne, write \$0 in the	e space. Incl	ude your no	on-filing
-	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all	emplo	yers for that pers	on on the lin	es below. If	you need
						For Debtor 1	For Debt		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$_	0.00	\$	N/A	

Deb	tor 1	Keith Coleman				Case	number (if known)			
	Cor	by line 4 here			4.	For	Debtor 1	noi	r Debtor 2 or n-filing spouse N/A	
5.		all payroll deduct				· -		<u> </u>		_
5.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, a Mandatory cont Voluntary contri	and Social Secur ributions for reti ibutions for retir ments of retirem ort obligations	rement plans ement plans	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h	\$_ \$_ \$_ \$_ \$_	0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	- - - - -
6.	Add		· · ·	5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00		N/A	_
7.	Cal	culate total month	ly take-home pay	J. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	_
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	profession, or fa Attach a statemer receipts, ordinary monthly net incor Interest and div Family support regularly receive Include alimony, settlement, and punemployment Social Security Other government Include cash ass that you receive, Nutrition Assistan Specify: Pension or retire	n rental property arm ent for each prope y and necessary b me. idends payments that ye e spousal support, property settlemen compensation ent assistance the istance and the ye such as food star nce Program) or h ement income	rand from operating a business, rty and business showing gross business expenses, and the total ou, a non-filing spouse, or a dependent of the support, maintenance, divorce	8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 1,831.00 0.00 810.16	\$\$ \$\$\$ \$\$\$	N/A N/A N/A N/A N/A N/A	- - - -
9.	Add	I all other income.	Add lines 8a+8b	+8c+8d+8e+8f+8g+8h.	9.	\$	2,641.17	\$_	N//	A
	Add		10 for Debtor 1 an	+ line 9. d Debtor 2 or non-filing spouse. the expenses that you list in Sc	10. \$		2,641.17 +	\$	N/A = \$	2,641.17
	Incli othe Do	ude contributions fro er friends or relative	om an unmarried s.	partner, members of your househol	d, your deper			•		0.00
12.		te that amount on th		line 10 to the amount in line 11. chedules and Statistical Summary of						2,641.17
13.	Do :	you expect an incr	rease or decreas	e within the year after you file thi	s form?					y income
		Yes. Explain:	Debtor does r	not anticipate any changes in	income or	expe	nses. He is o	lisable	d and on a fix	ed

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Fill :	in this informa	tion to identify y	Our case.				
		don to identify	our case.				
Deb	tor 1	Keith Cole	man		Check	if this is:	
					_	n amended filing	
	tor 2						g post-petition chapter 13
(Spc	ouse, if filing)				ex	penses as of the follo	owing date:
Unit	ted States Bank	cruptcy Court for	r the: EASTERN DISTRICT OF VIRO	GINIA	1	MM / DD / YYYY	
Case	e number				ПΛ	caparata filing for D	ebtor 2 because Debtor 2
	nown)					aintains a separate h	
Of	ficial Fo	D 61					
			Expenses				12/1/
			-		. 11	21.6	12/13
			ossible. If two married people are filin ded, attach another sheet to this form.				
		er every question		on the top of any additi	Jonas Pages,	write your manie u	
Part 1.	1: Descri	t cose?	ehold				
1.	•						
	No. Go to						
	☐ Yes. Does	Debtor 2 live i	n a separate household?				
	□N	o					
	□ Y	es. Debtor 2 mu	st file a separate Schedule J.				
2.	Do you have	dependents?	■ No				
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state t	he dependents'					□ No
	names.	1					☐ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
3.	Do your expe	enses include	■ No				
		people other tha	an Dy				
	yourself and	your depender	its?				
Part	2: Estima	ate Your Ongoi	ing Monthly Expenses				
Esti	mate your exp	enses as of you	r bankruptcy filing date unless you are	e using this form as a su	pplement in	a Chapter 13 case	to report
		ate after the ba	nkruptcy is filed. If this is a supplemen	ntal <i>Schedule J</i> , check th	e box at the	top of the form and	d fill in the
app	licable date.						
			on-cash government assistance if you k d it on <i>Schedule I: Your Income</i> (Offici			Your exp	enses
4.		r home owners for the ground o	hip expenses for your residence. Includer lot.	e first mortgage payments	s 4. \$		1,193.58
	If not include	ed in line 4:					
	4 5 1				4 4		0.00
		state taxes	o or rontor's incurer as		4a. \$		0.00
		•	s, or renter's insurance		4b. \$		0.00
			pair, and upkeep expenses ion or condominium dues		4c. \$ 4d. \$	-	90.00
5.			ents for your residence, such as home ed	mity loans	4d. \$ 5. \$		0.00 0.00
٥.	A AUGIGIONAL II	ioi igage payille	and for your residence, such as nothe ec	quity ioans	J. Þ		0.00

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	Keith Coleman	Case numb	ber (if known)	
T 1421	:44			
6. Util i 6a.	ities: Electricity, heat, natural gas	6a.	\$	210.00
6b.	Water, sewer, garbage collection	6b.	\$	60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services		\$	105.00
6d.	Other. Specify: Home Warranty		\$	
			\$	30.00
	d and housekeeping supplies	7.		357.64
	dcare and children's education costs	8.	\$	0.00
	thing, laundry, and dry cleaning	9.	\$	50.00
	sonal care products and services	10.	\$	40.00
	lical and dental expenses	11.	\$	50.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	64.95
	not include car payments. ertainment, clubs, recreation, newspapers, magazines, and books		\$	
			. —	50.00
	ritable contributions and religious donations	14.	\$	0.00
	irance.			
15a.	not include insurance deducted from your pay or included in lines 4 or 20. Life insurance	15a.	\$	0.00
15b.			\$	0.00
15c.			\$	0.00
	Other insurance. Specify:		\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	0.00
. Tax		16.	\$	0.00
	allment or lease payments:		Ψ	0.00
. 11130 17a.		17a.	\$	0.00
17b.			\$	0.00
17c.		17c.	\$	100.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report a		Ψ	0.00
	n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 6I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spec		19.	Ψ <u> </u>	0.00
	er real property expenses not included in lines 4 or 5 of this form or on <i>Scho</i>		e.	
20a.		20a.		0.00
20b.		20b.		0.00
20c.		20c.	·	0.00
20d.		20d.		0.00
	Homeowner's association or condominium dues		\$	0.00
	er: Specify:		. —	0.00
. Ош	er; specify:		+\$	0.00
. You	r monthly expenses. Add lines 4 through 21.	22.	\$	2,401.17
	result is your monthly expenses.		-	_
. Calo	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2,641.17
23b.	Copy your monthly expenses from line 22 above.	23b.	-\$	2,401.17
		ſ	-	,
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	240.00

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Eastern District of Virginia

In re	Keith Coleman			Case No.	
			Debtor(s)	Chapter	13
	DECLARATIO	N CONCEDN	JINC DERTOI	DIS SCHEDIII	FC .
	DECLARATIC	ON CONCERN	ING DEDIOR	X S SCHEDUL	ES .
	DECLARATION UN	DER PENALTY (OF PERJURY BY	INDIVIDUAL DE	BTOR
		. 4 . 71	1.1 6	1 1 1	
	I declare under penalty of per sheets, and that they are true and corre				les, consisting of
			y mio wroago, mion	con, and conon.	
_	January 44, 0044	G 1	In I Walth Calama		
Date _	January 14, 2014	Signature	/s/ Keith Colema Keith Coleman	ın	
			Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court Eastern District of Virginia

In re	Keith Coleman	Case No.		
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$1,946.40 2014 YTD: Social Security (as of 1/14/2014
\$33,328.80 2013: Approx. Social Security AND State Street Pension
\$33,328.80 2012: Approx. Social Security AND State Street Pension

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3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Wells Fargo Hm Mortgage 8480 Stagecoach Cir Frederick, MD 21701

DATES OF **PAYMENTS Monthly Mortgage Payment** \$1.193.58

AMOUNT PAID

AMOUNT STILL OWING

\$3,580.74 \$167,534.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> DATES OF PAYMENTS/ **TRANSFERS**

AMOUNT PAID OR VALUE OF **TRANSFERS**

AMOUNT STILL **OWING**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER Argent Federal Credit Union v. Keith Coleman NATURE OF PROCEEDING Warrant in Debt COURT OR AGENCY AND LOCATION **Chesterfield County General District** STATUS OR DISPOSITION **Judgment**

1/8/2013

Warrant in Debt

Court **Chesterfield County General District**

Pending

Midland Funding v. Keither Coleman

Court

1/14/2014 @ 1:00 pm

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY**

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

North & Associates, P.C. Bar# 29672 5913 Harbour Park Drive Midlothian, VA 23112 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR January 2014 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$860 Paid prior to filing: (SUBTRACT \$464.85) \$2,535.15 Attorney fee in the plan. 13 Individual w/ HOMESTEAD NO add cred: USB Filing fee \$281/ Credit counseling \$25 // Debtor Education \$25 // Credit report \$38 // Secure Remote Access \$\$ // Priority mail \$5.15 // Homestead Clerk \$21

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

NONE

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

None

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

R(S) IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

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13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

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NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records

NAME

None

ADDRESS

DATES SERVICES RENDERED

■ of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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B7 (Official Form 7) (04/13)

7

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

None

ADDRESS

DATE OF WITHDRAWAL

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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B7 (Official Form 7) (04/13)

Q

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date January 14, 2014
Signature /s/ Keith Coleman
Keith Coleman
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Form B203

2005 USBC, Eastern District of Virginia

United States Bankruptcy Court Eastern District of Virginia

In	re Keith Coleman	Ca	se No.	
	De	ebtor(s) Ch	apter	13
	DISCLOSURE OF COMPENSATION	OF ATTORNEY FO	R DE	CBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I compensation paid to me, for services rendered or to be rendered o bankruptcy case is as follows:			
	For legal services, I have agreed to accept	\$		3,000.00
	Prior to the filing of this statement I have received			464.85
	Balance Due			2,535.15
2.	\$ of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify)			
4.	The source of compensation to be paid to me is:			
	$\blacksquare \text{Debtor} \Box \text{Other} \left(specify \right)$			
5.	\square I have not agreed to share the above-disclosed compensation with	any other person unless they a	re meml	pers and associates of my law firm.
	■ I have agreed to share the above-disclosed compensation with a pecopy of the agreement, together with a list of the names of the peo Abacus Credit counseling \$25 / Dave Ramsey Debtor Ec Chesterfield Homestead Clerk \$21	ple sharing in the compensation	n, is atta	ached. \$114.15
6.	In return for the above-disclosed fee, I have agreed to render legal serva. Analysis of the debtor's financial situation, and rendering advice to b. Preparation and filing of any petition, schedules, statement of affaic. Representation of the debtor at the meeting of creditors and confirmed. Representation of the debtor in adversary proceedings and other confirmed. Other provisions as needed:	the debtor in determining who rs and plan which may be requ nation hearing, and any adjour	ther to tired;	file a petition in bankruptcy;
7.	By agreement with the debtor(s), the above-disclosed fee does not incl	ude the following services:		

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Form B203 - Continued

CERTIFICATION

2005 USBC, Eastern District of Virginia

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

North & Associates, P.C. Bar# 29672

Name of Law Firm 5913 Harbour Park Drive Midlothian, VA 23112 (804) 739-3700 Fax: (804) 739-2550

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$3,000 (For all Cases Filed on or after 10/17/2005)

NOTICE TO DEBTOR(S) AND STANDING TRUSTEE PURSUANT TO INTERIM PROCEDURE 2016-1(C)(7)

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C)(7)(a), you have ten (10) business days from the meeting of creditors in this case in which to file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 Trustee, and U. S. Trustee pursuant to Interim Procedure 2016-1(C)(7)(a) and Local Bankruptcy Rule 2002-1(D)(1)(f), by first-class mail or electronically.

January 14, 2014

Date

/s/ Pia J. North

Pia J. North 29672

Signature of Attorney

Pia J. North 5913 Harbour Park Drive Midlothian, VA 23112

North & Gasgalds, 30175-KRH Doc 1 Resided ON/184/12/HornEntered 01/14/14 11:36:49 Desc Main 4 DOOCUMENT AVENUE 38 of 46 Richmond, VA 23230

Argent Federal Credit 11651 Alliance Cir Chester, VA 23831

Wells Fargo Bank Po Box 14517 Des Moines, IA 50306

Bank Of America Po Box 982235 El Paso, TX 79998

Wells Fargo Bank Nv Na Po Box 31557 Billings, MT 59107

Citi Po Box 6241 Sioux Falls, SD 57117 Wells Fargo Hm Mortgag 8480 Stagecoach Cir Frederick, MD 21701

Commonwealth of VA-Tax P.O. Box 2156 Richmond, VA 23218-2156

Wells Fargo RegAgent Corporation Service Company P.O. Box 1463 Richmond, VA 23218

Edward S. Whitlock, Esquire Lafayette, Ayers & Whitlock 10160 Staples Mill Rd #105 Glen Allen, VA 23060

Internal Revenue Service Insolvency Unit Post Office Box 7346 Philadelphia, PA 19114

Keybank Usa 4910 Tiedman Road Client Cleveland, OH 44144

Midland Fund 8875 Aero Dr Suite 200 San Diego, CA 92123

Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123

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B 22C (Official Form 22C) (Chapter 13) (04/13)

In re	Keith Coleman	According to the calculations required by this statement:
	Debtor(s)	■ The applicable commitment period is 3 years.
Case Nu		☐ The applicable commitment period is 5 years.
	(If known)	☐ Disposable income is determined under § 1325(b)(3).
		■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME			
1	Marital/filing status. Check the box that applies and complete the balance of this part of a. ■ Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10. b. □ Married. Complete both Column A ("Debtor's Income") and Column B ("Spous All figures must reflect average monthly income received from all sources, derived during calendar months prior to filing the bankruptcy case, ending on the last day of the month be the filing. If the amount of monthly income varied during the six months, you must divide six-month total by six, and enter the result on the appropriate line.	the six efore		Column B Spouse's Income
2	Gross wages, salary, tips, bonuses, overtime, commissions.		\$ 0.00	\$
3	Income from the operation of a business, profession, or farm. Subtract Line b from Line enter the difference in the appropriate column(s) of Line 3. If you operate more than one by profession or farm, enter aggregate numbers and provide details on an attachment. Do not number less than zero. Do not include any part of the business expenses entered on Lina deduction in Part IV.	ousiness, enter a ne b as		
	Debtor Spouse			
	a. Gross receipts \$ 0.00 \$ b. Ordinary and necessary business expenses \$ 0.00 \$ c. Business income Subtract Line b from Line a		\$ 0.00	\$
4	Rents and other real property income. Subtract Line b from Line a and enter the difference the appropriate column(s) of Line 4. Do not enter a number less than zero. Do not include part of the operating expenses entered on Line b as a deduction in Part IV. Debtor Spouse a. Gross receipts \$ 0.00 \$ b. Ordinary and necessary operating expenses \$ 0.00 \$ c. Rent and other real property income Subtract Line b from Line a	de any	\$ 0.00	\$
5	Interest, dividends, and royalties.		\$ 0.00	\$
6	Pension and retirement income.		\$ 831.00	
7	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for the purpose. Do not include alimony or separate maintenance payments or amounts paid by debtor's spouse. Each regular payment should be reported in only one column; if a payment listed in Column A, do not report that payment in Column B.	the nt is	\$ 0.00	\$
8	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 8. However, if you contend that unemployment compensation received by you or your spous benefit under the Social Security Act, do not list the amount of such compensation in Color B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$	umn A	6 000	¢.
	be a beliefit under the Social Security Act		\$ 0.00	3

9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of		
	international or domestic terrorism. Debtor Spouse a. \$ \$		
	b. \$ \$	0.00	\$
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).	831.00	\$
11	Total. If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.		831.00
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PE	RIOD	
12	Enter the amount from Line 11	\$	831.00
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contect calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of yenter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular the household expenses of you or your dependents and specify, in the lines below, the basis for excludincome (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional as on a separate page. If the conditions for entering this adjustment do not apply, enter zero. [a	your spouse, ar basis for ling this debtor or the	
	b.		
	Total and enter on Line 13	\$	0.00
14	Subtract Line 13 from Line 12 and enter the result.	\$	831.00
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the numeriter the result.	mber 12 and	9,972.00
16	Applicable median family income. Enter the median family income for applicable state and househol information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy cour		
	a. Enter debtor's state of residence: VA b. Enter debtor's household size:	1 \$	51,817.00
17	 Application of § 1325(b)(4). Check the applicable box and proceed as directed. ■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable composed top of page 1 of this statement and continue with this statement. □ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The application at the top of page 1 of this statement and continue with this statement. 	-	-
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE	INCOME	
18	Enter the amount from Line 11.	\$	831.00
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 to any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expert debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B incompayment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustment separate page. If the conditions for entering this adjustment do not apply, enter zero. a.	nses of the come(such as otor's	
	c. \$		
	Total and enter on Line 19.	\$	0.00
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$	831.00

21		lized current monthly inc ne result.	ome for § 1325(b)(3). N	/Iultip	oly the amount from Line 2	0 by the number 12 and	\$	9,972.00
22	Applic	able median family incom	e. Enter the amount from	n Lin	e 16.		\$	51,817.00
23	□ The 132	e amount on Line 21 is mo 25(b)(3)" at the top of page amount on Line 21 is not 25(b)(3)" at the top of page	re than the amount on 1 of this statement and of those than the amount	Line comp	22. Check the box for "Di lete the remaining parts of line 22. Check the box for	this statement. "Disposable income is no	t deterr	mined under §
	132				DEDUCTIONS FR			,,01 11
					ds of the Internal Reve			
24A	Enter i applica bankru on you	nal Standards: food, appar n Line 24A the "Total" amount able number of persons. (T ptcy court.) The applicable r federal income tax return.	ount from IRS National shis information is availate number of persons is the plus the number of any	Stand ble at e nun addit	ards for Allowable Living www.usdoj.gov/ust/ or fromber that would currently be tional dependents whom you	Expenses for the om the clerk of the e allowed as exemptions ou support.	\$	
24B	Out-of- Out-of- www.u who ar older. (be allo you suj Line cl	Procket Health Care for per-Pocket Health Care for per-Pocket Health Care for per-Pocket Health Care for per-Pocket Health Care for per-Isdoj.gov/ust/ or from the ce under 65 years of age, an (The applicable number of wed as exemptions on your poort.) Multiply Line a1 by Line Multiply Line a2 by Line d Lines c1 and c2 to obtain	rsons under 65 years of a rsons 65 years of age or lerk of the bankruptcy co d enter in Line b2 the ap persons in each age cate; federal income tax retur Line b1 to obtain a total b2 to obtain a total amo	nge, a older ourt.) oplica gory i rn, pl l amo ount f	nd in Line a2 the IRS Nati. (This information is avail Enter in Line b1 the applicable number of persons who is the number in that category the number of any additional for persons under 65, and older, ar	onal Standards for able at cable number of persons of are 65 years of age or ory that would currently ional dependents whom and enter the result in and enter the result in Line		
	Persons under 65 years of age			Persons 65 years of age or older				
	a1.	Allowance per person		a2.	Allowance per person			
	b1.	Number of persons		b2.	Number of persons			
	c1.	Subtotal		c2.	Subtotal		\$	
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.			\$				
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court) (the applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.							
	b.	IRS Housing and Utilities Average Monthly Payment home, if any, as stated in L	for any debts secured by ine 47		r \$		φ.	
		Net mortgage/rental expen			Subtract Line b fr		\$	
	Local	Standards: housing and u	tilities: adjustment. If s	von c	ontend that the process set	out in Lines 25A and	1	
26	Standa	nes not accurately compute rds, enter any additional and tion in the space below:	the allowance to which	you a	re entitled under the IRS H	lousing and Utilities		

	Local Standards: transportation; vehicle operation/public transportation expense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.	expenses of operating a vehicle and			
27A	Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 7. \square 0				
	If you checked 0, enter on Line 27A the "Public Transportation" amo Transportation. If you checked 1 or 2 or more, enter on Line 27A the Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/	e "Operating Costs" amount from IRS Local e applicable Metropolitan Statistical Area or	\$		
27B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that your public transportation expenses, enter on Line 27B the "Public To Standards: Transportation. (This amount is available at www.usdoj.go.court.)	you are entitled to an additional deduction for ransportation" amount from the IRS Local	\$		
28					
	a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle	\$			
	b. 1, as stated in Line 47	\$			
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$		
29	the result in Line 29. Do not enter an amount less than zero.				
	a. IRS Transportation Standards, Ownership Costs	\$			
	Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 47	\$			
	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$		
30	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.				
31	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as mandatory uniform costs. Do not include discretionary amounts, such as voluntary deductions for employment are required for your employment, such as mandatory uniform costs.	retirement contributions, union dues, and	\$		
32	Other Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance any other form of insurance.		\$		
33	Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in line 49.		\$		
34	Other Necessary Expenses: education for employment or for a phythe total average monthly amount that you actually expend for educate education that is required for a physically or mentally challenged depproviding similar services is available.	ion that is a condition of employment and for	\$		
35	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do		\$		
36	Other Necessary Expenses: health care. Enter the total average mo health care that is required for the health and welfare of yourself or yoursurance or paid by a health savings account, and that is in excess of include payments for health insurance or health savings accounts	onthly amount that you actually expend on our dependents, that is not reimbursed by the amount entered in Line 24B. Do not	\$		

(-	Comment Form 220) (Chapter 13) (04/13)				
37	Other Necessary Expenses: telecommunication services. Enter the actually pay for telecommunication services other than your basic ho pagers, call waiting, caller id, special long distance, or internet service welfare or that of your dependents. Do not include any amount pre	me telephone and cell phone service - such as ce-to the extent necessary for your health and	\$		
38	Total Expenses Allowed under IRS Standards. Enter the total of I	Lines 24 through 37.	\$		
	Subpart B: Additional Living	g Expense Deductions			
	Note: Do not include any expenses that	- •			
	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.				
39	a. Health Insurance \$				
	b. Disability Insurance \$				
	c. Health Savings Account \$				
	Total and enter on Line 39		\$		
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:				
	\$				
40	Continued contributions to the care of household or family member expenses that you will continue to pay for the reasonable and necessarill, or disabled member of your household or member of your immedexpenses. Do not include payments listed in Line 34.	\$			
41	Protection against family violence. Enter the total average reasonab actually incur to maintain the safety of your family under the Family applicable federal law. The nature of these expenses is required to be	\$			
42	Home energy costs. Enter the total average monthly amount, in excession Standards for Housing and Utilities that you actually expend for hom trustee with documentation of your actual expenses, and you must claimed is reasonable and necessary.	\$			
43	Education expenses for dependent children under 18. Enter the to actually incur, not to exceed \$156.25 per child, for attendance at a pr school by your dependent children less than 18 years of age. You mu documentation of your actual expenses, and you must explain why necessary and not already accounted for in the IRS Standards.	\$			
44	Additional food and clothing expense. Enter the total average mont expenses exceed the combined allowances for food and clothing (app Standards, not to exceed 5% of those combined allowances. (This infor from the clerk of the bankruptcy court.) You must demonstrate t reasonable and necessary.	parel and services) in the IRS National formation is available at www.usdoj.gov/ust/	\$		
45	Charitable contributions. Enter the amount reasonably necessary for contributions in the form of cash or financial instruments to a charitat 170(c)(1)-(2). Do not include any amount in excess of 15% of your	ble organization as defined in 26 U.S.C. §	\$		
46	Total Additional Expense Deductions under § 707(b). Enter the to	otal of Lines 39 through 45.	\$		

Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 47. Name of Creditor
Name of Creditor Property Securing the Debt Average Monthly include taxes or insurance a. □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount Total: Add Lines Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.
Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor Property Securing the Debt 1/60th of the Cure Amount a. Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.
a. STOTAL: Add Lines STOTAL: A
Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.
priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.
Chapter 13 administrative expenses. Multiply the amount in Line a by the amount in Line b, and enter the
resulting administrative expense.
a. Projected average monthly Chapter 13 plan payment. b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)
c. Average monthly administrative expense of chapter 13 case Total: Multiply Lines a and b
51 Total Deductions for Debt Payment. Enter the total of Lines 47 through 50.
51 Total Deductions for Debt Payment. Enter the total of Lines 47 through 50. \$ Subpart D: Total Deductions from Income
Subpart D: Total Deductions from Income
Subpart D: Total Deductions from Income 52 Total of all deductions from income. Enter the total of Lines 38, 46, and 51. \$
Subpart D: Total Deductions from Income 52 Total of all deductions from income. Enter the total of Lines 38, 46, and 51. Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2)
Subpart D: Total Deductions from Income 52 Total of all deductions from income. Enter the total of Lines 38, 46, and 51. Part V. DETERMINATION OF DISPOSABLE INCOME UNDER § 1325(b)(2) 53 Total current monthly income. Enter the amount from Line 20. \$ Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy

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B 22C (Official Form 22C) (Chapter 13) (04/13)

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	Deduction for special circumstances. If there are special of there is no reasonable alternative, describe the special circumstances, list additional entries on a separate page. Total provide your case trustee with documentation of these exports of the special circumstances that make such expense necessary.	mstances and the resulting expenses in lines a-c the expenses and enter the total in Line 57. You expenses and you must provide a detailed explain.	below. ou must
57	Nature of special circumstances	Amount of Expense	
	a.	\$	
	b.	\$	
	c.	\$	
		Total: Add Lines	\$
58	Total adjustments to determine disposable income. Add result.	the amounts on Lines 54, 55, 56, and 57 and en	ter the \$
59	Monthly Disposable Income Under § 1325(b)(2). Subtract	et Line 58 from Line 53 and enter the result.	\$
	Part VI. ADDITIO	NAL EXPENSE CLAIMS	
	Other Expenses. List and describe any monthly expenses,	not otherwise stated in this form, that are require	ed for the health and welfare
	of you and your family and that you contend should be an a 707(b)(2)(A)(ii)(I). If necessary, list additional sources on each item. Total the expenses.	dditional deduction from your current monthly	income under §
60	707(b)(2)(A)(ii)(I). If necessary, list additional sources on	dditional deduction from your current monthly	income under § average monthly expense for
60	707(b)(2)(A)(ii)(I). If necessary, list additional sources on each item. Total the expenses.	dditional deduction from your current monthly a separate page. All figures should reflect your Monthly a	income under § average monthly expense for
60	707(b)(2)(A)(ii)(I). If necessary, list additional sources on each item. Total the expenses. Expense Description	dditional deduction from your current monthly a separate page. All figures should reflect your Monthly A \$	income under § average monthly expense for
60	707(b)(2)(Å)(ii)(I). If necessary, list additional sources on each item. Total the expenses. Expense Description a. b. c.	dditional deduction from your current monthly a separate page. All figures should reflect your Monthly A \$ \$ \$	income under § average monthly expense for
60	707(b)(2)(A)(ii)(I). If necessary, list additional sources on each item. Total the expenses. Expense Description a. b. c. d.	dditional deduction from your current monthly a separate page. All figures should reflect your Monthly A \$ \$ \$ \$ \$	income under § average monthly expense for
60	707(b)(2)(A)(ii)(I). If necessary, list additional sources on each item. Total the expenses. Expense Description a. b. c. d.	dditional deduction from your current monthly a separate page. All figures should reflect your Monthly A \$ \$ \$	income under § average monthly expense for
60	707(b)(2)(A)(ii)(I). If necessary, list additional sources on each item. Total the expenses. Expense Description	dditional deduction from your current monthly a separate page. All figures should reflect your Monthly A \$ \$ \$ \$ \$	income under § average monthly expense for
	707(b)(2)(A)(ii)(I). If necessary, list additional sources on each item. Total the expenses. Expense Description a. b. c. d. Total: Add L Part VII.	dditional deduction from your current monthly a separate page. All figures should reflect your Monthly 2 \$ \$ \$ \$ sines a, b, c and d \$ VERIFICATION ded in this statement is true and correct. (If this	income under § average monthly expense for Amount
60	707(b)(2)(A)(ii)(I). If necessary, list additional sources on each item. Total the expenses. Expense Description a. b. c. d. Total: Add L Part VII. I declare under penalty of perjury that the information provides the sources of the provided in the pr	dditional deduction from your current monthly a separate page. All figures should reflect your Monthly 2 \$ \$ \$ \$ \$ sines a, b, c and d \$ VERIFICATION	income under § average monthly expense for Amount

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2013 to 12/31/2013.

Line 6 - Pension and retirement income

Source of Income: State Street Retirement Services

Constant income of \$831.00 per month.

Non-CMI - Social Security Act Income Source of Income: Social Security

Constant income of \$1,946.40 per month.